

CHICO NURSERY SCHOOL  
1190 E. First Avenue  
Chico, CA 95926  
(530)891-1723

**PARENTS T.B. TEST**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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CHECK ONE:        \_\_\_\_\_    Intradermal T.B. Test (PPD)  
                         \_\_\_\_\_    Chest X-ray

Date: \_\_\_\_\_

Results: \_\_\_\_\_

Signature: \_\_\_\_\_

\_\_\_Physician    \_\_\_Physician's Assistant    \_\_\_Nurse Practitioner    \_\_\_Other

Please return this form to the above address.